PAYMENT BOND	DATE BOND EXECUTED (Must be same or later than date of contract) August 15, 2014				OMB No.:90	00.0045	
(See Instructions on reverse)					3,110,13000-0043		
Public reporting burden for this collection of information is estimate to average a sources, gethering and meintaining the date needed, and completing and review aspect of this collection of information, including suggestions for reducing this b DC 20405	ng the collection of informati	on. Send comme	enta rege	arding this	burden estimat	te or eny other	
PRINCIPAL (Legal name and business address)		TYPE OF ORGANIZATION ("X" one)					
Carothers Construction, Inc.		INDIVIDUAL PARTNERSHIP					
P. O. Box 189 Taylor, MS 38673		JOINT VENTURE X CORPORATION					
					1S		
SURETY(IES) (Namels) and business address(es)		PENAL SUM					
Liberty & Autorit Leaves - Comment		MILLION(S) THOUSAND(S		SAND(S)	HUNDRED(S)	CENTS	
Liberty Mutual Insurance Company 175 Berkeley Street Boston, MA 02116		CONTRACT DA	399 TE	CONTRAC		ŅΟ	
		8/15/201	4	N69450	-14-D-1266	j-0001	
OBLIGATION:							
We, the Principal and Surety(ies), are firmly bound to the United State payment of the penal sum, we bind ourselves, our heirs, executors Sureties are corporations acting as co-sureties, we, the Sureties, bind purpose of allowing a joint action or actions against any or all of us Principal, for the payment of the sum shown opposite the name of the of the penal sum.	e, administrators, and su lourselves in such sum ' . For all other purposes,	accessors, joint jointly and sev , each Surety I	tly and erally" sinds its	severall as well a self, joint	y. However is "severally" ily and sever	r, where the only for the ally with the	
CONDITIONS							

The above obligation is void if the Principal promptly makes payment to all persons having a direct relationship with the Principal or a subcontractor of the Principal for furnishing lebor, material or both in the prosecution of the work provided for in the contract identified above, and any authorized modifications of the contract that subsequently are made. Notice of those modifications to the Surety(ies) are waived.

WITNESS:

The Principal and Suroty(ics) executed this payment bond and affixed their seals on the above date.

Carothers Co	nstruction, Inc. PRINCIPA	L			VX U.S.	
SIGNATURE(S)	1. (Seal) 2.	(Seei)		(Seal)	Corporate	
NAME(S) & TITLE(S) (Typed)	SCOTT MURPHY VICE PRESIDENT		3.		Seal	
	INDIVIDUAL SUR	ETY(IES)				
SIGNATURE(S)	1. (Seal)	2.			(Seal)	
NAME(S) (Typed)	1.	2.				
	CORPORATE SUR	ETY(IES)				
NAME & ADDRESS	Liberty Mutual Insurance Company 175 Berkeley Street, Boston, MA 02116	STATE OF MA				
SIGNATURE(S)	Linka D. Whettinton	2.		Corporate Seal		
NAME(S) & TITLE(S) (Typed)	Linda D. Whittington Attorney-in-Factorial	2.				
AUTHORIZED FOR Previous edition is a	LOCAL REPRODUCTION		STANDARD Prescribed by GS	FORM 2	5A (REV 10-98) CFR) 53.2228(c)	

		CORPORATE SURETY(IE	S) (Continued)		······	
89	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT		
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal	
ns	NAMEIS) & TITLE(S) (Typed)		2.			
<u>၂</u>	NAME & ADDRESS		STATE OF INC.	CABILITY LIMIT		
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal	
S	NAME(S) & TITLE(S) (Typed)	1.	2.			
_	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT		
SURETY	SIGNATURE(S)	1,	2 .		Corporate Seal	
SU	NAME(S) & TITLE(S) (Typed)	1.	2.			
	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT		
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal	
SU	NAMEIS) & TITLE(S) (Typed)	1.	2.			
ш	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT		
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal	
SU	NAME(S) & TITLE(S) (Typedi	1.	2.			
5	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT		
SURETY	SIGNATUREISI	1.	2.		Corporate Seal	
SU	NAME(S) & TITLE(S) (Typed)	1.	2,			

INSTRUCTIONS

- This form, for the protection of persons supplying labor and material, is used when a payment bond is required under the Act of August 24, 1935, 49 Stat. 793 (40 U.S.C. 270a-270e). Any deviation from this form will require the written approval of the Administrator of General Services.
- 2. Insert the full legal name and business address of the Principal in the space designated "Principal" on the face of the form. An authorized person shall sign the bond. Any person signing in a representative capacity (e.g., an attornoy-in-fact) must furnish evidence of authority if that representative is not a member of the firm, partnership, or joint venture, or an officer of the corporation involved.
- (a) Corporations executing the bond as sureties must appear on the Department of the Treasury's list of approved sureties and must act within the limitation listed therein. Where more than one corporate surety is involved, their nomes and addresses shall appear in the spaces (Surety A, Surety B, etc.) headed "CORPORATE" SURETY(IES)." In the space

designated "SURETY(IES)" on the face of the form, insert only the letter identification of the sureties.

- (b) Where individual sureties are involved, a completed Affidavit of individual Surety (Standard Form 28) for each individual surety, shall accompany the bond. The Government may require the surety to furnish additional substantiating information concerning their financial capability.
- 4. Corporations executing the bond shall affix their corporate seals, individuals shall execute the bond opposite the word "Corporate Seal", and shall affix an adhesive seal if executed in Maine, New Hampshire, or any other jurisdiction requiring adhesive seals.
- 5. Type the name and title of each person signing this bond in the space provided.